


# GREENWOOD COUNTY SHERIFF'S OFFICE

## Applicant Waiver, Consent & Certifications



Applicant Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Telephone: \_\_\_\_\_ Date: \_\_\_\_\_

**TO WHOM IT MAY CONCERN:** I am applying for employment with the Greenwood County Sheriff's Office. GCSO must thoroughly investigate my academic, employment, and personal histories to evaluate suitability for employment.

I hereby authorize any GCSO representative bearing this release (or a facsimile thereof) to obtain any information regarding me in your files, and I hereby direct you to release such information as soon as practicable upon the request of the bearer. I hereby authorize a review of, and full disclosure of, all records or any part thereof whether said records are public, private, or confidential. This information may include (but is not limited to) military service records, educational records, financial records, credit reporting information, criminal history records, driving records, employment files (to include investigatory files, complaints, efficiency/personnel evaluations, and/or complaints/grievances filed by or against me).

I hereby release you, your organization, and all others from liability or damages which may result from providing the information requested, to include damages or remedies provided for by State or Federal law. Regardless of any agreement I may have made earlier, I hereby release your organization (including its officers, employees, and related personnel) from all liability for damages of whatever kind which may result in regard to me or my heirs, family, and/or assigns.

For and in consideration of GCSO acceptance, review, and processing of my application materials, I agree to hold GCSO and all of its employees or agents harmless from any claims liability associated with my application for employment or in any way connected with a decision not to employ me. I understand that GCSO's pre-employment background investigation reveals criminal activity, that information will be forwarded to the appropriate law enforcement authority.

I understand my rights pursuant to §5 USC 552A (Privacy Act of 1974) with regard to access and disclosure of records, and I waive those rights with the understanding that information furnished will be used by GCSO in conjunction with employment screening procedures.

A photocopy or facsimile of this release shall be valid as an original thereof, even though the copy may not contain an original writing of my signature. This release and waiver shall remain valid and in force for a period of 60 days from the date upon which i signed it.

Should any questions arise as to the validity of this release, you may contact me at the telephone number listed at the top of this form.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
GCSO Representative Signature

PLEASE READ THE FOLLOWING STATEMENTS AND SIGN BELOW

**Student Loans:** SC State law (§59-111-50) prohibits employment with the State or its political subdivisions to persons who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. I certify by my signature below that I am not currently in default on a student loan.

**Physical Examination:** The GCSO hiring process may include a physical examination. If required, a Greenwood County physician will provide the examination to me at no expense. The examination will include a test for drug dependency or use, and by my signature below I consent to such an examination and test.


**Terms of Employment:** Neither this application, any attendant forms, or any of the language used herein implies or creates any type of employment contract between GCSO and the applicant/employee, nor do they create any contractual rights or entitlements. *No promises or assurances (whether written or oral) which are contrary to or inconsistent with this paragraph create any contract of employment.* If I am eventually employed, I understand that such employment is at-will and may be terminated by either party with or without notice at any time, for any reason or no reason. No one other than the Sheriff possesses any authority to enter into any agreement for employment for any specified period of time, or make any agreement contrary to the foregoing.

**Veracity:** I understand that GCSO may verify the information I have provided within this application and/or in personal interviews. By my signature below, I affirm, agree, and understand all statements made within this application to be true and accurate. I further understand that any misrepresentation, falsification, or material omission of information or data may result in exclusion from further consideration, or (if hired) termination of employment. My signature also certifies that I understand any offer of employment to be conditional upon successful completion of the GCSO pre-employment background investigation.

\_\_\_\_\_  
Applicant Signature


\_\_\_\_\_  
GCSO Representative Signature

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# GREENWOOD COUNTY SHERIFF'S OFFICE

## Application for Employment



**Attention Applicant:** Completing this packet is your first step toward joining the Greenwood County Sheriff's Office, a dynamic law enforcement agency dedicated to excellence in public service. In order to present the strongest, most accurate record of your qualifications and skills, please read this packet thoroughly and prepare it carefully. Neither this application, the attendant forms, or any of the language used herein implies or creates any type of employment contract between GCSO and the applicant/employee, nor do they create any contractual rights or entitlements. **No promises or assurances (whether written or oral) which are contrary to or inconsistent with this paragraph create any contract of employment.** All GCSO employees have at least occasional access to law enforcement sensitive information. As such they are subject to a thorough pre-employment background investigation, and must complete the entire application and sign where required.

**Position for Which You Are Applying:**

☐ DEPUTY SHERIFF    ☐ DETENTION OFFICER    ☐ ANIMAL CONTROL    ☐ ADMINISTRATIVE    ☐ DISPATCH

☐ OTHER (Specify) \_\_\_\_\_

**Personal / Contact Information**

NAME \_\_\_\_\_  
Last First Middle Suffix?

ADDRESS \_\_\_\_\_  
Number & Street City State Zip Code

HOME / DAY TELEPHONE \_\_\_\_\_ EVENING / ALTERNATE TELEPHONE \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_ DRIVERS LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

EMAIL \_\_\_\_\_ 21 OR OLDER? (If applying for law enforcement position) \_\_\_\_\_

DATE AVAILABLE FOR WORK \_\_\_\_\_ LICENSED LAW ENFORCEMENT OFFICER? \_\_\_\_\_

RELATIVES EMPLOYED BY GCSO? (Please list) \_\_\_\_\_

MILITARY SERVICE: BRANCH \_\_\_\_\_ DATES \_\_\_\_\_to\_\_\_\_\_ DD214 Avail? \_\_\_\_\_

**Academic Education (High School / College)**

School Name and Location	Month and Year Attended	Credits Earned			Major	Type of Degree Awarded	Year Degree Received
		Quarter	Semester	Other (Specify)			
	From						
	To						
	From						
	To						
	From						
	To						

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Work Experience & History

Describe your work experience in detail, beginning with your current or most recent job (attach additional sheets if required). Include military service (indicate rank) and job related volunteer work, if applicable. Provide an explanation for any gaps in employment. All information in this section must be complete. A résumé may be attached, *but not substituted for completing this section.*

Present or last employer

Address

Supervisor

Month/Years of Employment: From / to

Reason for leaving

Job Duties (provide details)

Title

Phone

Hours per week

Annual Salary

Total time employed

May we contact?

Next most recent employer

Address

Supervisor

Month/Years of Employment: From / to

Reason for leaving

Job Duties (provide details)

Title

Phone

Hours per week

Annual Salary

Total time employed

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Annual Salary

Total time employed

May we contact?

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Additional Skills, Qualifications, and Experiences

Please list any other job-related experiences, skills, qualifications, or licenses which would benefit GCSO in the job for which you have applied (e.g. foreign language fluency, instructor ratings, specific computer skills, etc.).

Background Information

ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES?

☐ YES

☐ NO

HAVE YOU EVER BEEN TERMINATED OR FORCED TO RESIGN FROM ANY JOB?

☐ YES

☐ NO

IF YES, EXPLAIN

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE?

☐ YES

☐ NO

IF YES, LIST ALL CHARGES AND LOCATIONS (OMIT MINOR TRAFFIC VIOLATIONS)

Provide the names and contact information of three persons (EXCLUDE relatives and coworkers) who are familiar with your work and personal history:

Name

Address

Name

Address

Name

Address

Occupation

Phone

Occupation

Phone

Occupation

Phone

If you will require any accommodation or assistance during the pre-employment background investigation or interview process because of a disability, please describe:

NOTICE OF OBTAINING CONSUMER REPORT (FCRA COMPLIANCE)

In connection with your application for employment, the Greenwood County Sheriff’s Office may obtain a consumer report (as defined by the Fair Credit Reporting Act) concerning you from a consumer reporting agency. This report will be used for the purposes of predicting your ability to maintain a financial solvency required of GCSO employees due to their access to law enforcement sensitive information.

GCSO Representative

Date

I have read and understand the above disclosure and hereby authorize GCSO to obtain a consumer report.

Applicant

Date

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